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Federal Security Agency
U. S. PUBLIC HEALTH SERVICE
Division of Nurse Education

U. S. CADET NURSE CORPS

Origin and Plan of Operation

On June 15, 1943, the President approved the Bolton Act which had been passed by the 78th Congress; On July 12 funds became available; and within a week, application forms and instructions were being mailed to some 1,300 accredited schools of nursing which may be eligible to participate in this new nurse education program. At the same time letters describing the relationship of all nursing and hospital groups were being sent to State and local nursing councils for war service, State Boards of Nurse Examiners, Presidents of State Leagues of Nursing Education, Directors of Schools of Nursing, Hospital Administrators, Presidents of Collegiate Schools of Nursing, Nurse Associations, Public Health Nursing Organizations. High schools, colleges, hospitals, and nursing organizations are being urged to give immediate, active support to the recruitment campaign for the enrollment of 65,000 new student nurses in the U. S. Cadet Nurse Corps before June 1, 1944.

PREVIOUS The shortage of nurses which has now become acute was foreNURSE seen in 1941 when Congress appropriated \$1.2 million to the U. S.
TRAINING Public Health Service to use in assisting schools of nursing to
train additional student nurses and to provide refresher and postgraduate courses. The appropriation was nearly doubled in 1942,
and altogether a total of \$5.3 million was appropriated for the biennium
1941-43. This year Congress has made available \$45 million for a much more
comprehensive program and more funds will be appropriated as needed to carry
out the purposes of the Bolton Act.

The nurse training recruitment program, initiated as part of the National Defense health activities, was successful within the limitations imposed by law. Appropriations during the fiscal years 1941 and 1942 aided 12,000 student nurses in 309 schools of nursing. Equipment and supplies for libraries and laboratories and salaries for instructors were also provided. About 3,800 inactive nurses were given refresher courses and some 4,800 graduate nurses received postgraduate training in special fields essential to the war effort.

WAR It became evident during 1942 that nurses could not be CREATED trained fast enough to meet the rapidly increasing demands of both the military and civilian populations. Graduate nurses, responding quickly to the call of the armed forces, left the staffs SHORTAGE of hospitals, health and welfare agencies, schools and institutions.

Civilian needs for nurses mounted in war-boom areas. The influx of millions of new workers, both men and women, created unprecedented health problems not only in industrial plants but also in trailer camps and in communities where crowded, insanitary living quarters menaced the health of workers and their families. War industries more than doubled the number of nurses employed for industrial health work. Hospitals were pressed

for additional services at the very time their staffs of doctors, interns, and nurses were being depleted. Wards and sections were closed in many hospitals because of lack of personnel.

Yet, the demand for hospital care continued to mount as the number of maternity cases increased and as more people tended to seek hospitalization for minor ailments when home medical services were unavailable. Use of hospitals also was stimulated by the growth of membership in Blue Cross plans and by the greater ability of people to pay for health and surgical services as incomes rose. The greatly increased patient turnover created a great strain upon medical and nursing facilities.

AID OF FEDERAL GOVERNMENT SOLICITED

During the Fall of 1942, the situation grew so much worse that hospital administrators and nursing leaders consulted Federal agencies to see what could be done. Emphasizing the fact that the program then in operation was insufficient to meet the requirements of the armed forces and at the same

time maintain essential civilian services, they urged broadening the scope of the nurse training program.

The need for more substantial Government aid in the recruitment of nurses became apparent when the Army and Navy issued a call for 2,500 nurses each month during 1943 in addition to the 35,000 already in military service. The plan which was eventually implemented by the Bolton Act was developed in a series of conferences attended by representatives of the National Mursing Council for War Service, the American Hospital Association, the U.S. Public Health Service, the Health and Medical Committee, Federal Security Agency, and other governmental agencies.

BOLTON ACT INTRODUCED

Out of these deliberations grew the legislation introduced in the House (H. R. 2326) by Mrs. Frances P. Bolton, Congresswoman from Ohio. Hearings were held by committees of the House and the Senate on May 7-8, 1943. Representatives of the Army, Navy, Veterans Administration, Public Health Service, Office of

Civilian Defense and other Federal agencies concerned with the problem urged the passage of the bill as did the representatives of many private groups and institutions.

MANY GROUPS ENDORSE MEASURE

Dr. Claude W. Munger, Director of St. Luke's Hospital, New York City, representing the American Hospital Association, presented a resolution of the Board of Trustees of that Association approving the bill and urging "favorable action with minimum delay." Dr. Munger stressed the really desper-

ate situation in civilian hospitals as a result of the shortage of nursing personnel and stated that the administrators of large hospitals were "at a loss to know what to do about this lack of nurses."

Other organizations represented at the hearings were: The American Red Cross, The Catholic Hospital Association of the United States and Canada, the American Protestant Hospital Association, the American Nurses Association, the National Association for Colored Graduate Nurses, the National League of Mursing Education, the National Organization for Public Health Nursing, the Association of Collegiate Schools of Nursing, and the American Psychiatric Association. Prior to, and during the hearings,

letters and telegrams were received by governmental officials from hospital superintendents in all parts of the country describing their predicament due to inadequate nursing staffs. Stating that patients were being denied admission and that wards had been closed and could not be reopened until more graduate nurses became available, they urged passage of the Bolton bill and approval of funds for the training program.

The unanimity of opinion as to the need for nurses, and the widespread approval of the proposed legislation to help meet the need, convinced the congressional committees of the soundness of the proposals. The legislation which was quickly passed by both houses without a dissenting vote, authorizes Federal grants-in-aid to approved nurse training schools meeting certain scholastic and curricular requirements.

ACT BEGINS TO FUNCTION Immediately after the passage of the Act, a Division of Nurse Education was established in the Public Health Service directly responsible to the Surgeon General. Miss Lucile Petry was appointed Director. She had been on the nurse education staff of the Public Health Service for the past two

years and had recently been appointed Dean of the Cornell University-New York Hospital School of Nursing, New York City, and then granted leave of absence.

The Federal Security Administrator, as directed by the Bolton Act, appointed an Advisory Committee on Training for Nurses to meet with the Surgeon General. The Committee is composed of: Chancellor Oliver C. Carmichael, Vanderbilt University; James A. Hamilton, New Haven Hospital; Miss Marion G. Howell, Western Reserve University; Sister Helen Jarrell, Loyola University; Dr. Hyrum Leo Marshall, University of Utah; Rev. Alphonse M. Schwitalla, St. Louis University; Miss Isabel M. Stewart, Columbia University; Miss Margaret Tracy, University of California; Miss Anna D. Wolf, the Johns Hopkins Hospital.

FIRST
MEETING
OF ADVISORY
COMMITTEE

On June 25 and 26, Dr. Thomas Parran, Surgeon General of the U.S. Public Health Service, held the first conference with this Committee at which rules and regulations governing the administration of the program were prepared. They were approved by the Surgeon General on July 5, 1943, and were published in the Federal Register of July 9, 1943. In issuing

these regulations the Surgeon General explained that:

"The objectives of the Public Health Service and of the Advisory Committee in formulating the regulations were to insure a sound educational program, but to leave the responsibility for the administration of specific programs to the individual schools and hospitals. No one Federal pattern is to be set. The schools will be free to select their own students, to plan their own curricula, and to formulate policies consistent with the Act and the traditions of the institutions concerned."

ACCELERATED CURRICULA REQUIRED The Bolton Act provides that participating schools must agree to accelerate their curricula so that the required program of combined study and practice will be completed in from 24 to

30 months, except that in the case of students admitted prior to January 1, 1942, this period may extend to 32 months. The remaining period before graduation is to be devoted to supervised practice either in the home hospital, other civilian hospital, or a Federal hospital or agency. To be eligible for participation in the program a school must provide satisfactory living facilities, adequate student health service, clinical experience in medicine, surgery, pediatrics, and obstetrics. In general, the standards of the National League of Nursing Education are being used as a guide. Any institution, such as an accredited school of nursing, a hospital, a university, or a college, operating nurse education facilities and wishing to participate, may apply direct to the U. S. Public Health Service which is the Federal agency authorized to administer the Act. It is possible for the smaller schools of nursing-those connected with hospitals having a daily average patient-population of less than 100--to participate, provided the clinical experience available and the educational program meet the regulations of the Surgeon General.

ITEMS COVERED BY ALLOTMEN Application forms for participation in the Federal Nurse Training Program, together with instructions for preparing the required budgets, may be obtained by writing to the Division of Nurse Education, U. S. Public Health Service, Washington, D. C. Funds will be allotted to the participating

schools in accordance with the plans which they have submitted to the Public Health Service for review and approval. Funds may now be requested for the following items:

- (1) Maintenance. -- Reasonable maintenance will be paid for all students who are members of the U. S. Cadet Nurse Corps for the first nine months of their training, provided that the hours of student practice in the hospital do not exceed an average of 24 per week, and that the hours of combined practice and class work do not exceed 48 in any one week.
- (2) Tuition. -- Reasonable tuition and fees for all members of the Corps will be paid, it being assumed that existing or already established rates are reasonable.
- (3) <u>Uniforms and Insignia.</u>— The cost of outdoor uniforms and insignia will be paid for all members of the Corps, provided such uniforms conform to the "Regulations for Uniforms for the U. S. Cadet Nurse Corps," as prescribed by the Surgeon General.
- (4) Stipends.— The Public Health Service will pay to each cadet during her first 9 months of training (Pre-Cadet period) not less than \$15 per month and during the next 15 to 21 months (Junior Cadet period) not less than \$20 per month. Senior Cadets, who will be engaged in supervised practice, will be paid by the hospital or agency employing their services, and the stipend shall be not less than \$30 per month. The Federal Government does not pay the Senior Cadet stipend.

STUDENT BENEFITS AND OBLIGA-TIONS The U. S. Public Health Service will pay maintenance costs for the first nine months of the study course and full instructional costs, as well as cost of uniforms, books, laboratory fees, etc., and stipends to first and second year student nurses in schools which have approved plans. This aid is available for students who satisfy the school that

they are physically and scholastically fit and who, when enrolling in the U. S. Cadet Nurse Corps, will sign a statement promising that, upon graduation they will be available for the duration of the war in either military or essential civilian nursing services. This promise does not preclude marriage nor does it imply that a nurse must enter one of the armed services. She may serve in a non-governmental hospital, the Veterans Administration, Public Health Service, Indian Service, a war industry plant, or in other essential war service.

Expansion of School Facilities

Expansion of housing and such educational facilities as classrooms and libraries, will be necessary in many nursing schools if the required number of student nurses are to be enrolled in the U. S. Cadet Nurse Corps. Institutions which cannot finance the entire cost of such additions are eligible to apply for assistance under the Lanham Act. Channels have been cleared to enable prompt consideration of applications.

Institutions applying for financial aid under the Lanham Act make their preliminary request to the Regional Office of the Federal Works Agency having jurisdiction in the state. New construction will be permitted only upon evidence that existing buildings are not available for lease or purchase that might be suitably altered or rehabilitated.

Institutions which do not require assistance from the Federal Works Agency under the Lanham Act should make application for priorities assistance directly to the War Production Board, Washington, D. C.

The Surgeon General, in urging hospitals, nursing schools, and other interested groups to give the program full publicity, and to act with all possible speed in making their applications, said:

"The task of the U. S. Cadet Nurse Corps is to enroll 65,000 additional students in basic schools of nursing during the present fiscal year; to make the students available for full-time nursing duty under supervision at an earlier date than was possible under the former plan; and to maintain a continuous supply of graduate nurses pledged to serve in essential nursing positions: for the duration of the war. Whether we accomplish this vital war objective depends upon the teamwork which all of us apply to our specific tasks in the program."

